Facsimile: 202-501-1124

Cathy Cox SECRETARY OF STATE



FILE COPY

Secretary of State

Elections Division
Suite 1104, West Tower
2 Martin Luther King, Jr. Drive, S.E.
Atlanta, Georgia 30334-1505

www.sos.state.ga.us

Linda W. Beazley
DIRECTOR
(404) 656-2871
FAX (404) 651-9531
Iboozley@www.sos.stele.ga.us

January 16, 2004

U.S. General Services Administration Attention: Deborah J. Schilling Director of Budget 1800 F Street, NW Washington, DC 20405-0002

Re Expenditure Reports for Title I -- Section 101 and 102 Funding

Dear Ms. Schilling:

As required by the Help America Vote Act of 2002 (hereinafter "HAVA"), and pursuant to the distribution directive sent out by the General Services Administration, on July 28, 2003, please find enclosed the State of Georgia's first report of expenditures of Title I, Section 101 and Section 102 funds for the December 31, 2003 reporting period.

As required by the directive, we are enclosing a separate reporting form 269 for Section 101 and 102 expenditures.

If we can provide you with any additional information, please contact me at 404-657-5352.

Sincerely

Clifford D. Tatum, Assistant Director Legal Affairs - Elections Division

Enclosures

ORIGINAL

FINANCIAL STATUS REPORT (Short Form) (Follow instructions on the back)

Federal Agency and Organizational Element to Which Report is Submitted			Federal Grant or Other Identifying Number Assigned By Federal Agency				OMB Approval No.		Page	of	
General Services Adminstration/HAVA 1800 F. Street Washington, DC 20405-0002				Section 102				039	1	1 pages	
Georgia Se	ganization (Name and comple ecretary of State	ete address,	including ZIP code	e)				1	•		
214 State (Atlanta, Ge	Capitol eorgia 30334										
4. Employer Ide	entification Number	nt Account Numbe	er or Identifying Number 6. Final Report 7. Basis						4		
5	8-6002028		1013	10134			No	☐ Ca	ish 💆	Accrual	
	ant Period (See Instructions) th, Day, Year) n/a	To: (Mont	h, Day, Year) n/a	9. Period Covere From: (Month	ed by h, Day	, Year)	To: (Month, Day, Year)			•	
10. Transaction		<u> </u>	1 !/ 🗸	ı		ll l	11		ll ll		
				Previously Reported		This Period			Cumulative		
a. Total o	a. Total outlays			0	0.00	4,740,4	148.00	18.00 4,740,		448.00	
b. Recipient share of outlays				0	0.00		0.00			0.00	
c. Federal share of outlays				0	0.00	4,740,4	448.00 4,740,4		448.00		
d. Totalu	unliquidated obligations								0.00		
e. Recipient share of unliquidated obligations										0.00	
f. Federal share of unliquidated obligations						Entry Causers of	<u>Ot Newton ase</u> Section 1983 Caral Caral			0.00	
g. Total Federal share (Sum of lines c and f)								4,	 740,	448.00	
h. Total Federal funds authorized for this funding period							4,740,44				
i. Unobligated balance of Federal funds (Line h mir			inus line g)	11年の場合は登録を展開された。 「日本の場合は、日本の場合は、日本の場合は、 「日本の場合」という。「日本の場合」という。 「日本の場合」という。「日本のも、「日本				48 (4) 4 (-4) (-4) (-4) (-4) (-4) (-4) (-4) (-4)		0.00	
	a. Type of Rate (Place "X" in		· 	termined	<u>Selvices</u>	Final	.j.g.idata	L			
11. Indirect Expense	b. Rate	c. Bas		d. Total Amo		Final	e. Federa	Fixed al Shar	e		
12. Remarks: A	Litach any explanations deeme	d necessary	or information regu	ired by Federal spon	soring	agency in con	nnliance w	ith gov	ernino l	legislation	
		w.,,	# 1111 wirthware	nod by i odoror op c	3019	agonoy ar co	ipiianoo sii	.urgov	310019	едізіаноп.	
13. Certification	: I certify to the best of my obligations are for the p	knowledge	and belief that thi	is report is correct a	and c	omplete and I	hat all ou	tlays a	nd un	liquidated	
Typed or Printed		ui posco co.	110111111111111111111111111111111111111	u documents.	Te	elephone (Area	a code, nu	mbera	and ext	ension)	
Media Osa	agi	(404)463-0719			,						
Signature of Auti	horized Certifying Official	[][asi	\(\)	Da	ate Report Sub	mitted 1/16/2	2004			
			$-\alpha$				17 1072.	.004			

FILE COPY

FINANCIAL STATUS REPORT (Short Form) (Follow instructions on the back)

Federal Agency and Organizational Eleme to Which Report Is Submitted	ent 2.	Federal Grant or Other Identifying Number Assigned By Federal Agency			ber	OMB Appro No. 0348-003		ngo of	
General Services Adminstration/HAVA 1800 F. Street Washington, DC 20405-0002		Section 102				0348-0033		pages	
Recipient Organization (Name and comple Georgia Secretary of State 214 State Capitol Atlanta, Georgia 30334	eto address, Ind	cluding ZIP codo)						
4. Employer Identification Number 58-6002028		umber or Identifying Number 6. Fina 0134			No	7. Basis Cash	Accrual		
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) n/a	To: (Month,	Day. Year) n/a		eriod Covered by om: (Month, Da 4/1/20	y, Ycar)	To: (M	, Year) /2003		
10. Transactions		l Previously Reported	T)	nis riod	c	ill Cumulative			
a. Total outlays			0.00	4,740,	448.00	4,7	4,740,448.00		
b. Recipiont share of outlays				0.00		0.00)	0.00	
c. Federal share of outlays				0.00	4,740	4,740		40,448.00	
d. Total unliquidated obligations							1	0.00	
e. Racipiontshare of unliquidated obligations								0.00	
f. Federal share of unliquidated obligations								0.00	
g. Total Federal share (Sum of lines c and f)				:			4,7	40,448.00	
h. Total Federal funds authorized for this funding period						 5	4,7	4,740,448.00	
i. Unobligated balance of Federal funds (Lino h minus line					*		. :	0.00	
a. Type of Rate (Place "X"			ermine	i [Final] Fixod		
Expenso b. Rate	c. Base	:		d. Total Amount		e. Fede	ral Share		
12. Remarks: Attach any explanations deem									
13. Certification: I certify to the best of mobiligations are for the	y knowledge a purposes set	nd belief that th forth in the awa	is repo	rt is correct and iments.	complate an	d that all o	utlaysan	id unliquidated	
Typed or Printed Name and Title	$\sim 10^{-1}$	1	,		Telephone (A				
Media Osayi, Accounting Manager	\sim	71	(404)463-0719 Date Report Submitted						
Signature of Authorized Cortifying Official	105×	ingr'		<u> </u>	Date Nepolto		/2004		